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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/527,271	03/08/2005	Alan Crossman	G & C 184.4-USWO	3503
22462 GATES & COO	7590 12/17/200 DPER LLP	EXAMINER		
	GHES CENTER	JAVANMARD, SAHAR		
6701 CENTER DRIVE WEST, SUITE 1050 LOS ANGELES, CA 90045			ART UNIT	PAPER NUMBER
			1627	
			MAIL DATE	DELIVERY MODE
			12/17/2009	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary		Appli	cation No.	Applicant(s)				
		10/52	7,271	CROSSMAN ET	CROSSMAN ET AL.			
		Exam	iner	Art Unit				
		SAHA	R JAVANMARD	1627				
Period fo	The MAILING DATE of this communi r Reply	cation appears or	the cover sheet with th	e correspondence a	ddress			
WHIC - Exter after - If NO - Failu Any r	ORTENED STATUTORY PERIOD FOR HEVER IS LONGER, FROM THE MASSING (6) MONTHS from the mailing date of this communication for reply is specified above, the maximum stare to reply within the set or extended period for reply eply received by the Office later than three months after date the patient term adjustment. See 37 CFR 1.704(b).	AILING DATE OF 37 CFR 1.136(a). In runication. tutory period will apply a will, by statute, cause the	THIS COMMUNICATI TO event, however, may a reply be The application to become ABANDO	ON. The timely filed rom the mailing date of this entry (35 U.S.C. § 133).				
Status								
1) 又	Responsive to communication(s) file	d on <i>04 Septemb</i>	er 2009					
	Responsive to communication(s) filed on <u>04 September 2009</u> . This action is FINAL . 2b) This action is non-final.							
′=		<i>′</i> —		prosecution as to th	ie merits is			
٠,١	3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under <i>Ex parte Quayle</i> , 1935 C.D. 11, 453 O.G. 213.							
Dispositi	on of Claims							
-	Claim(s) <u>26-37 and 39-45</u> is/are pend	-						
	4a) Of the above claim(s) is/are withdrawn from consideration.							
·	5) Claim(s) is/are allowed.							
· ·	Claim(s) <u>26-37 and 39-45</u> is/are rejection	ctea.						
•	Claim(s) is/are objected to.	tion and/or alastic	an roquiroment					
اـــا(٥	Claim(s) are subject to restrict	lion and/or election	m requirement.					
Applicati	on Papers							
9) 🗌 🤈	The specification is objected to by the	Examiner.						
10)	The drawing(s) filed on is/are:	a) accepted c	r b)□ objected to by th	e Examiner.				
	Applicant may not request that any object	tion to the drawing	(s) be held in abeyance.	See 37 CFR 1.85(a).				
	Replacement drawing sheet(s) including	the correction is re	quired if the drawing(s) is	objected to. See 37 C	FR 1.121(d).			
11)	The oath or declaration is objected to	by the Examiner	. Note the attached Offi	ice Action or form P	TO-152.			
Priority u	ınder 35 U.S.C. § 119							
· .	Acknowledgment is made of a claim f ☐ All b)☐ Some * c)☐ None of:		-	(a)-(d) or (f).				
	1. Certified copies of the priority documents have been received.							
	2. Certified copies of the priority documents have been received in Application No							
	3. Copies of the certified copies of the priority documents have been received in this National Stage							
application from the International Bureau (PCT Rule 17.2(a)). * See the attached detailed Office action for a list of the certified copies not received.								
3	ee the attached detailed Office action	TIOI A list of the t	ettilled copies flot fece	ivea.				
Attachmen	Ne)							
Attachment 1) Notice	e of References Cited (PTO-892)		4) Interview Summ	ary (PTO-413)				
2) Notic	e of Draftsperson's Patent Drawing Review (P	ГО-948)	Paper No(s)/Mai	I Date				
	nation Disclosure Statement(s) (PTO/SB/08) r No(s)/Mail Date <u>8/6/09; 9/1/09; 10/23/09</u> .		5) Notice of Information (6) Other:	al Patent Application				

DETAILED ACTION

Status of the Application

This Office Action is in response to applicant's arguments filed on September 4, 2009. Claim(s) 26-37 and 39-45 and are examined herein.

Response to Arguments

In view of Applicant's cancellation of claim 50, the 112 first paragraph rejection is hereby withdrawn.

Applicant's arguments with respect to 103(a) rejection of claims 26, 27, 30, 33-34, 36-37, 39 and 41-45 as being unpatentable over Chenard et al. (EP 0900568 A2) in view of Ling et al. (US Patent 6,200,970) have been considered and the rejection is hereby withdrawn.

Applicant's arguments with respect to 103(a) rejection of claim 35 as being unpatentable over Chenard et al. (EP 0900568 A2) in view of Ling et al. (US Patent 6,200,970) as applied to claims 26, 27, 30, 33-34, 36-37, 39 and 41-45 above in further view of

http://web.archive.org/web/20000815082545/neurologychannel.com/parkinsonsdisease/index.shtml (referred to as "PD website" heretofore) have been considered and the rejection is hereby withdrawn.

Applicant's arguments with respect to 103(a) rejection of claims 26-34, 36, 37, and 39-45 as being unpatentable over Leventer (US Patent No. 6,649,607 B2) in view of Chenard et al. (EP 0900568 A2) have been fully considered but are not persuasive.

Applicant's arguments with respect to 103(a) rejection of claim 35 is rejected under 35 U.S.C. 103(a) as being unpatentable over Leventer (US Patent No. 6,649,607 B2) in view of Chenard et al. (EP 0900568 A2) as applied to claims 26-34, 36, 37, and 39-45 above in further view of

http://web.archive.org/web/20000815082545/neurologychannel.com/parkinsonsdisease/index.shtml (referred to as "PD website" heretofore) have been fully considered but are not persuasive.

Applicants contend that the underlying mechanism by which chorea and dystonia are produced are known and are different from the mechanisms underlying epileptic or convulsive activity based on the therapeutic agents that are prescribed therein.

Applicant further argues that Chenard's definition of dyskinesia conflicts with what is taught in the art.

These arguments are not persuasive. The definition of dyskinesia is defined as "excessive abnormal movements that are involuntary." Further, the different categories of dyskinesia are defined as including chorea, dystonia, myoclonus, tremor, etc (according to the website "answers.com"). Thus, in light of this definition, the term dyskinesia as defined by Chenard does not appear to conflict with the art as Applicant alleges. Thus, because Leventer teaches that the administration of tofisopam treats convulsions and/or seizures including myoclonic jerks, it would be obvious to one of

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ordinary skill in the art to try, with a reasonable degree of success, to administer said drug to treat dyskinesia in view of Chenard's disclosure, which teaches dyskinesia is as "excessive abnormal movements that are involuntary" including chorea, tremor, dystonia, myoclonus, and tic.

Therefore, it is Examiner's opinion that based on the foregoing arguments and rejections made of record, the instant claims are deemed unpatentable over the cited art.

The 103(a) rejection is hereby maintained and modified as necessitated by amendment in the FINAL office action below.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

This application currently names joint inventors. In considering patentability of the claims under 35 U.S.C. 103(a), the examiner presumes that the subject matter of the various claims was commonly owned at the time any inventions covered therein were made absent any evidence to the contrary. Applicant is advised of the obligation under 37 CFR 1.56 to point out the inventor and invention dates of each claim that was not commonly owned at the time a later invention was made in order for the examiner to

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consider the applicability of 35 U.S.C. 103(c) and potential 35 U.S.C. 102(e), (f) or (g) prior art under 35 U.S.C. 103(a).

Claims 26-34, 36, 37, and 39-45 are rejected under 35 U.S.C. 103(a) as being unpatentable over Leventer (US Patent No. 6,649,607 B2) in view of Chenard et al. (EP 0900568 A2).

Leventer teaches the administration of S-tofisopam for the treatment of convulsions or seizures selected from Parkinson's disease, other neurodegenerative diseases including Huntington's disease, schizophrenia, tics (e.g., Tourette's syndrome), head injury, among others (column 3, line 65-column 4, line 10).

Further, Leventer teaches that S-tofisopam can be administered alone or in combination with one or more other anti-convulsant agents to treat convulsions or seizures including myoclonic jerks (i.e., clonic activity) (column 9, lines 45-49).

Leventer does not specifically teach treating dyskinesia per se. Leventer also does not teach that the convulsions or seizures arising from Parkinson's or Tourette's syndrome, for example, are a result of dyskinesia associated with dopamine agonist therapy.

As taught by Chenard, dyskinesia is defined as any abnormal or uncontrollable movement including chorea, tremor, dystonia, athetosis, myoclonus and tic (page 10, lines 50-52).

Furthermore, as is well known in the art and also taught by Chenard, dyskinesia is a side effect that results from dopamine agonist therapy in an effort to treat Parkinson's disease (page 2, lines 21-23).

As taught by Chenard, dopamine agonist therapy refers to therapy that increases dopamine receptor stimulation including bromocriptine and increasing levels of dopamine such as L-dopa among others (page 10, line 54-page 11, line 8).

It would have been obvious to one of ordinary skill in the art at the time of the invention to have employed the administration S-tofisopam for the treatment of convulsions or seizures selected from Parkinson's disease, other neurodegenerative diseases including Huntington's disease, schizophrenia, tics (e.g., Tourette's syndrome) and head injury as taught by Leventer and also used it to treat dyskinesia. As taught by Chenard, dyskinesia is defined as any abnormal or uncontrollable movement including chorea, tremor, dystonia, athetosis, myoclonus and tic. Thus by administering S-tofisopam, one in essence would have been treating the symptoms that arise from the ailments taught by Leventer of which are specific to dyskinesia, a few of which include tics and myoclonic jerks.

Additionally, it would have also been obvious to have administered S-tofisopam for the treatment of dyskinesia as discussed above and also employed the administration of S-tofisopam to treat dyskinesia that arises from an agent that is used to treat Parkinson's disease, namely dopamine agonists. One would be motivated to treat dyskinesia with the administration of S-tofisopam regardless of whether the dyskinesia results from the actual symptoms of a disease, specifically tics arising from

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Tourette's syndrome, or whether the dyskinesia is a side effect observed upon administration of an agent used to treat a particular disease, namely dopamine agonist therapy for Parkinson's disease.

Claim 35 is rejected under 35 U.S.C. 103(a) as being unpatentable over Leventer (US Patent No. 6,649,607 B2) in view of Chenard et al. (EP 0900568 A2) as applied to claims 26-34, 36, 37, and 39-45 above in further view of http://web.archive.org/web/20000815082545/neurologychannel.com/parkinsonsdisease/index.shtml (referred to as "PD website" heretofore).

Leventer and Chenard are discussed above.

Neither Leventer nor Chenard specifically teach the type of parkinsonism (i.e., idiopathic Parkinson's disease).

The "PD website" teaches that the most common type of Parkinson's disease is idiopathic Parkinson's disease because the cause is unknown.

It would have been obvious to one of ordinary skill in the art at the time of the invention that employing the treatment of dyskinesia associated with parkinsonism as discussed above, that one would have necessarily been treating idiopathic Parkinson's disease. The motivation, provided by the PD website, teaches that idiopathic Parkinson's disease is the most common type of the disease.

Conclusion

Claims 26-37, 39-45 and 50 are not allowed.

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Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

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A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

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Any inquiry concerning this communication or earlier communications from the examiner should be directed to SAHAR JAVANMARD whose telephone number is (571) 270-3280. The examiner can normally be reached on 8 AM-5 PM MON-FRI (EST).

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Sreeni Padmanabhan can be reached on (571) 272-0629. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

/S. J./

Examiner, Art Unit 1627

/SREENI PADMANABHAN/

Supervisory Patent Examiner, Art Unit 1627